

Residential: Evidence Based Treatment & Team Meetings

According to the DHS/DCFS Contract, Part II. Section VI: Service Requirements for Outpatient Mental Health Services,

4. The Contractor shall provide diagnostic and rehabilitative mental health services for Clients in Division custody or Clients who were adopted after being in Division custody who are referred for services by the Division. In addition to providing diagnostic and rehabilitative mental health services, the Contractor shall provide the following:

a. Evidence Based Treatment: The Contractor shall provide a treatment regime that is evidence-based treatment or evidence-informed treatment that is individualized based on the Client's age, diagnosis and circumstances. This includes, but is not limited to, addressing grief, loss, trauma, and criminogenic factors affecting the Client. The Contractor shall maintain documentation of staff training received and/or skills in the evidence based treatment for which the Client will be engaged to restore the highest possible level of function.

b. Team and Team Meetings: As part of a clinical mental health service, the Contractor shall actively participate as a member of the Team. The Contractor shall provide rehabilitative mental health and related services in collaboration with the Client's family and the foster/proctor family or other direct caregiver to promote stability and long-term permanence for each Client. The Contractor shall include both the Client's family and foster/proctor family or other direct caregiver in the Client's ongoing treatment to facilitate understanding of how to best address the Client's current and future mental health needs. The Contractor shall participate in all of the following Team Meetings:

(1) Contractor Initiated Team Meeting: The Contractor shall initiate a Team Meeting at any time it is deemed necessary. For example, it is appropriate to convene members of a Team Meeting in the development of the treatment plan, quarterly treatment plan review and to gather information from parents, proctor family, teachers, childcare providers, and Case Managers for the purpose of assessing the Client as part of the Psychiatric Diagnostic Interview Examination.

(2) Pre-Treatment Team Meeting: The Contractor shall participate in a team meeting prior to a Client beginning treatment. When that is not possible, the Contractor shall participate in a Team Meeting within 30 days of the Client beginning treatment.

(3) Ongoing Team Meeting: The Contractor shall participate in an ongoing Team Meeting to coordinate the Client's treatment plan with the Division service plan, the Client's permanency goal, and the long-term view.

(4) Change of Clinician/Treatment Provider Team Meeting: Prior to any change in clinician/treatment provider, unless it is an emergency situation, the Contractor shall participate in a Team Meeting to discuss reasons, solutions, and transitions that are most beneficial to the overall treatment goals and service plan for the Client.

(5) Discharge Team Meeting: Prior to discharge, the Contractor shall participate in a Team Meeting to discuss progress, maintenance, and transitions for long-term stability of the Client.